2008 FOR PROFIT CORPORATION **ANNUAL REPORT** DOCUMENT # P94000040111 ELECTRONIC SYSTEMS INTEGRATION, INC. Principal Place of Business Mailing Address 1055 SOUTH JOHN RODES BLVD. P.O. BOX 361182 MELBOURNE, FL 32936-1182 WEST MELBOURNE, FL 32904 US DO NOT WRITE IN THIS SPACE

FILED Apr 07, 2008 08:00 Al Secretary of State



DO NOT WRITE IN THIS SPACE		5.5.2555	01042008 No Chg-P CR2E034 (11/05)		
		TEINOIII	ber 48321	Applied Not Ap	d For plicable
			5. Certificate of Status Desired S8.75 Additional Fee Required		
6. Name and Address of Current Regis	tered Agent				
VAN PELT, RICHARD 370 CARISSA COURT SATELLITE BEACH, FL 32937 8. The above named entity submits this statement for the purpose of changing its registers		DO NOT WRITE IN THIS SPACE			
the obligations of registered agent.	nutpose of changing its register	ed differ of registered agent, or a	out, in the state of home	aa. Tan iannaa waa, ano	иссорі
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)		DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	Election Campaign Fina Trust Fund Contribution.		U000008 04/18/08-9		<u> </u>
10. OFFICERS AND DIRECTORS					

STREET ADDRESS 370 CARISSA CT CITY-ST-ZIP SATELLITE BEACH, FL 32937 TITLE JONES, EARL K NAME STREET ADDRESS 183 MASSINI AVE CITY-ST-ZIP PALM BAY, FL TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE STREET ADDRESS CITY-ST-ZIP THLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

VAN PELT, RICHARD T

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12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if charged, or on an attachment with an address with all other-like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP